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COVER LETTER

TO: Amendment Section Division of Corporations

Ocean Harbour Villas Owners Assoc	iation, Inc.
766849 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	g:
Susan Langen, Secretary	
(Name of Conta	ct Person)
Ocean Harbour Villas Owners Association, Inc.	
(Firm/ Com	pany)
4245 N. Hwy A1A, #6	
(Addres	s)
Hutchinson Island, FL 34949	
(City/ State and	Zip Code)
ohvillashoa@gmail.com	
E-mail address: (to be used for future annua	report notification)
For further information concerning this matter, please call:	
Susan Langen, Secretary, OHV HOA	516 4581363
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flori	da Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing I Certificate of Status Certified Copy (Additional conclosed)	Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILER
2010 SEP 12
125 The # 84
(State) Sorr Con

Ocean Harbour Villas Owners Association, Inc.			412	126711	4. 84
(Name of Corporation	n as currer	tly filed with the	Florida Dept. of	State) State	F. P. T. 2. 24
766849				•	COMISA
(Docu	ment Numb	per of Corporation	(if known)		
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statuti	es, this <i>Florida Ne</i>	ot For Profit Corp.	oration adopts	the following
A. If amending name, enter the new name of th	e corporat	<u>ion:</u>			
NA					Th.,
name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam	d "corpora <u>e</u> .	tion" or "incorpo	rated" or the abbr	eviation "Corp	The new o.'' or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		Ocean Harbour Villas Owners Association, Inc.			
		ESS) 4245 N. Hwy A1A. #6			
		Hutchinson Islan	nd, FL 34949		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Ocean Harbour	Villas Owners Asoc	ciation, Inc.	_
		4245 N. Hwy A1	A, #6	_	
		Hutchinson Islan	nd, FL 34949		
D. If amending the registered agent and/or registered new registered agent and/or the new register	stered office	e address in Flor	ida, enter the nan	ie of the	
		gen, Ocean Harbo	our Villas OA Inc, i	Secretary	
	4245 N. H	wy A1A, #6	- <u>-</u> -		
Non Panistonal Office Address	(Florida street address)				
<u>New Registered Office Address:</u>	Hutchinson Island			34949)
		(City)		Florida(Zip Code)	
New Registered Agent's Signature, if changing R hereby accept the appointment as registered agent	tegistered i t. I am fan	Agent: ullar with and acc	cept the obligations	of the position	1.
_	Su	m Dlo	yer.		
	Sig	gnature of New Re	gistered Agent, if o	hanging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	p	Scott Prinz	A-4536 40TH ST.
Add			HOLLAND, MI 49423
X Remove			
2) Change	ST	Cheryl Smith	4235 N. Hwy A1A, #13
Add			Hutchinson Island, FL
X Remove			34949
3) Change	<u>V</u>	Steven Schultz	4921 ARTHUR ST.
Add			HOLLYWOOD, FL 33021
X Remove			
4) Change	<u>s</u>	Susan Langen	4245 N. Hwy A1A, #6
X Add			Hutchinson Island, FL
Remove			34949
5) X Change	T	William Hanrahan	4235 N. Hwy A1A, #15
Add			Hutchinson, Island, FL
Remove			34949
6) Change	<u>v</u>	Gery Franko	155 Shamrock Lane
X Add			Falls, PA 18615
Remove		D	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Add Randy Robitzer as P - address: 3809 Penn Ave., Sinking Springs, PA 19608
Remove Scott Prinz as P - Address: A-4536 40TH ST., A-4536 40TH ST.
Change William Hanrahan from V to T; Address: 4235 N. Hwy A1A, #15, Hutchinson Island, FL 34949
Remove Cheryl Smith as ST, Address 4235 N. Hwy A1A, #13, Hutchinson Island, FL 34949
Add Susan Langen as S & Registered Agent; Address: 4245 N. Hwy A1A #6, Hutchinson Island, FL 34949
Remove Steven Schultz as V; Address: 4921 Arthur St., Hollywood, FL, 33021
Add Gery Franko as V; Address: 155 Shamrock Lane, Falls, PA 18615
Leave John Todd as V, Address: 4245 N. Hwy A1A, #7, Hutchinson Island, FL 34949

	e date of each amendment e this document was signed		ther than the
	ective date <u>if applicable</u> ;	April 8, 2018	
		(no more than 90 days after amendment file date)	
No doc	te: If the date inserted in the tument's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be listed the Department of State's records.	d as the
۱d	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	pere adopted by the members and the number of votes east for the amendment(s)	
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	April 9	8, 2018	
	Signature	Sind Janas	
	have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Susa	an Langen	
		(Typed or printed name of person signing)	
	Secr	retary, Ocean Harbour Villas OA, Inc,	
		(Title of person signing)	